

(When Filled In)

FORM 1822 OBSOLETE  
3-65

**GROUP 1**  
**EXCLUDED FROM AUTOMATIC**  
**DOWNGRADING AND DECLASSIFICATION**

(10-49)

Standard Form No. 1084  
7 GAO 5000  
1084-110-04

**PUBL. VOUCHER FOR PURCHASES AND  
SERVICES OTHER THAN PERSONAL**

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION  <div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto;"></div>		DATE VOUCHER PREPARED <div style="text-align: center; font-weight: bold;">30 September 1965</div>		VOUCHER NUMBER <div style="text-align: center; font-weight: bold;">2</div>	
PAYEE'S NAME AND ADDRESS		CONTRACT NUMBER AND DATE		PAID BY	
		REQUISITION NUMBER AND DATE			
		DATE INVOICE RECEIVED			
DISCOUNT TERMS		PAYEE'S ACCOUNT NUMBER		GOVERNMENT B/L NUMBER	
SHIPPED FROM		TO			

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <small>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</small>	QUAN- TITY	UNIT PRICE		AMOUNT <small>(1)</small>
				COST	PER	
Period ending	24 Sept. 1965	Reimbursable Costs				5476.55
		Fixed Fee				521.80
		(Date)				
		18 Sept.				
		(Date)				
<b>TOTAL</b>						5998.35

(Use continuation sheet(s) if necessary)

PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR BY: _____ TITLE: _____	EXCHANGE RATE = \$ _____ = \$1.00	DIFFERENCES _____ Amount verified; correct for (Signature or initials)
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Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

\_\_\_\_\_ (Date) \_\_\_\_\_ (Authorized Certifying Officer) \_\_\_\_\_ (Title)

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)								
Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Cont. or Subauth'n Activity	Bureau Control No.	Sub-auth'n No.	Identifi- cation No.	Amount

I.R. No's.

<b>PAID BY</b>	CHECK NUMBER	ON TREASURER OF THE UNITED STATES	CHECK NUMBER	ON (Name of bank)
	CASH	DATE	PAYEE	
	\$			

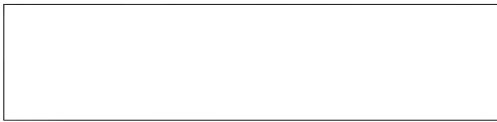
1 When stated in foreign currency, insert name of currency.  
 2 If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.  
 3 When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary" or "Treasurer", as the case may be.

PER  
TITLE

Public Voucher for Purchases and  
Services Other Than Personal

CONTINUATION SHEET

U.S.

Sheet No. 1 of Bureau Voucher No. \_\_\_\_\_

CONTRACT NO.

25X1

ESTIMATED COSTS \$	22041.00
FIXED FEE	2100.00
TOTAL	24141.00

85PCT OF FIXED FEE	1785.00
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ANALYSIS OF CLAIMED CURRENT AND  
CUMULATIVE COSTS AND FEE EARNED  
SEP 24 1965

CLASSIFICATION OF COSTS	CURRENT MO	FISCAL YR/DT	PERIOD/DATE
SALARIES AND WAGES	2500.04	3716.07	3716.07
TECHNICAL OVERHEAD ( .846000)	2115.04	3143.80	3143.80
MATERIALS AND SERVICES	2.58	2.58	2.58
TRAVEL	0.00	0.00	0.00
SUBCONTRACTS	0.00	0.00	0.00
TOTAL DIRECT COSTS	4617.66	6862.45	6862.45
GENERAL/ADMIN. COSTS ( .186000)	858.89	1276.42	1276.42
TOTAL COSTS	5476.55	8138.87	8138.87
FIXED FEE EARNED (PCT COMP.)	521.80	775.47	775.47
TOTAL AMOUNTS CLAIMED	5998.35	8914.34	8914.34